

**Application Data Sheet**

**Application Information**

Application number::  
Filing Date:: 04/15/04  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??:  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: PROXIMITY TRANSACTION APPARATUS  
AND METHODS OF USE THEREOF  
Attorney Docket Number:: 283-412  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 18  
Small Entity?:: No  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name::  
Family Name:: Sperduti  
Name Suffix::  
City of Residence:: Auburn  
State or Province of Residence:: NY  
Country of Residence:: US  
Street of Mailing Address:: 5 North Hunter Avenue  
City of Mailing Address:: Auburn  
State or Province of Mailing Address:: NY  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 13021

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Thomas  
Middle Name:: A.  
Family Name:: Siegler  
Name Suffix::  
City of Residence:: Charlotte  
State or Province of Residence:: NC  
Country of Residence:: US  
Street of Mailing Address:: 7510 East Independence Blvd., #100  
City of Mailing Address:: Charlotte  
State or Province of Mailing Address:: NC  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 28227

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Garrison  
Middle Name::  
Family Name:: Gomez  
Name Suffix::  
City of Residence:: Marietta  
State or Province of Residence:: NY  
Country of Residence:: US  
Street of Mailing Address:: 2891 Otisco Valley Road  
City of Mailing Address:: Marietta  
State or Province of Mailing Address:: NY  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 13110

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: William  
Middle Name:: H.  
Family Name:: Havens  
Name Suffix::  
City of Residence:: Marcellus  
State or Province of Residence:: NY  
Country of Residence:: US  
Street of Mailing Address:: 25 South Street, Apt. B-33  
City of Mailing Address:: Marcellus  
State or Province of Mailing Address:: NY  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 13108  
Citizenship: US

**Correspondence Information**

Correspondence Customer Number:: 20874

**Representative Information**

Representative Customer Number::	20874
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::